2001 UNIFORM BUSI ESS REPORT (UBR)

DOCUMENT # A00000001918

1. Entity Name
FOREMOST RESORT HOTELS, LTD.

FILED
01 JUL -6 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2111 GLENWOOD DRIVE
WINTER PARK, FL 32792

Mailing Address
2111 GLENWOOD DRIVE
WINTER PARK, FL 32792

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
696 NORTH MAITLAND AVENUE	215 NORTH EOLA DRIVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MAITLAND, FL	City & State: ORLANDO, FLORIDA
Zip: 32751 Country: USA	Zip: 32801 Country: USA

4. FEI Number — [X] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
AARON J. GOROVITZ
215 NORTH EOLA DRIVE
ORLANDO, FL 32801

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE * Supplemental Affidavit filed 5/3/01 [initials]
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

*9. Capital Contributions as Shown on record — 0

10. Amount of Capital Contributions in FLORIDA to date. — 0

11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form: an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P00000028419	STREET ADDRESS	
NAME	FOREMOST RESORT HOTELS, INC.		
STREET ADDRESS	696 NORTH MAITLAND AVE	CITY-ST-ZIP	
CITY-ST-ZIP	MAITLAND, FL 32751		
DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS		CITY-ST-ZIP	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

FOREMOST RESORT HOTELS, INC., GENERAL PARTNER

SIGNATURE: BY: [signature] 4/ /01